ROUTING AND TRANSMITTAL SLIP		Date 08/08/17	
O (Name, office symbol, room number, building, Agency/Post)	***************************************	Initials Date	
Copeland, Anna 6SF-TE		Odl: 8/8/	
2 Johnson, Lydia 6SF-TE		12 8/28	
Twine, Dyiane 6RC-S		0/ 3%	
Schilling, Leonard 6RC-ST		1/2 9/19	
Peycke, Mark 6RC-S		MM2 09/4	
. Twine, Dyiane 6RC-S		0 9/	
. Greenwell, Deborah 6SF-T		der 9/0	
Banip al, Ben 6SF T		120 9/27	
Greenwell_Deborah 6SF-T		Day 9/2	
o Copeland, Anna 6SF-TE		de 912	
Action	File	Note and Return	
Approval	For Clearance	Per Conversation	
As Requested	For Correction	Prepare Reply	
Circulate	For Your Information	See Me	
Comment	Investigate	Signature	
Coordination	Justify		
EMARKS 253 Three Eagle Industries, Inc GNL/104 Agent	4(e) Letters to:Eagle Industries, N	Matthew Salmon, Billie Hairl Salmon, Reg	

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

Goardness, and similar actions		
FROM (Name, org symbol, Agency/Post)	Room No - Bidg 10-138	
Anna Copeland	10-130	
Alina Copeland	Phone No.	
	1	

OPTIONAL FORM 41 (Rev. 1-94)
Prescribed by GSA

